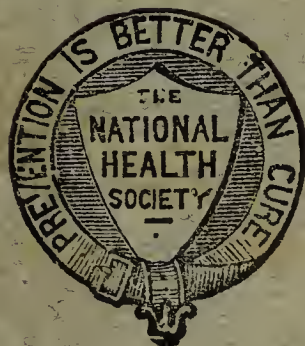


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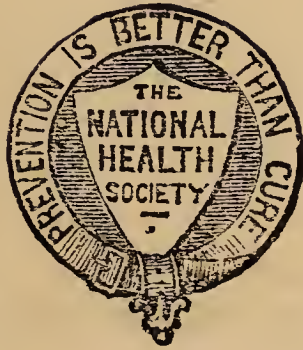
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NATIONAL HEALTH SOCIETY.

Office: 53, BERNERS STREET, OXFORD STREET, W.

President.—*HIS GRACE THE DUKE OF WESTMINSTER.*

The objects of the Society are to diffuse *Sanitary Knowledge amongst all Classes*, by organizing Lectures in Drawing-rooms, School-rooms, at Mothers' Meetings and Working Men's Clubs, on Prevention of the Spread of Infectious Disease, Food and Cookery, Rearing of Infants, Management of Households, First Aid to Injured, Home Nursing, and to circulate Tracts on these and kindred subjects.

The Committee are glad to facilitate the action of Members in arranging for the Sanitation of their own Dwelling-houses.

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IN A SICK-ROOM.



WHEN nursing at home, where there are not many appliances at hand, it is important to make the best of what there are.

VENTILATION.

It is not often possible to have the choice of a sick-room, but whenever you can, choose one where there is a fireplace, and where the window will open at the top. Miss Nightingale's first rule of nursing is 'to keep the air that the patient breathes as pure as the outside air, without chilling him.' Always air a room by opening the window; for the air out of doors is fresher than that in the house. Open the window at the top; for the hot, used-up air in the room rises to

the ceiling, and can thus make its escape. 'Windows are made to open; doors are made to shut.'

Cover the patient entirely (head and all) with a sheet, and change the air of the room entirely three or four times a day by throwing the window wide open while he remains covered.

If you throw up the sash of the window a few inches, and place a piece of board to fill up the open space, the fresh air will then enter between the top of the lower and the bottom of the upper sash, and no draught can be felt.

Stand as little as possible between the open window and fire. This is important to remember in nursing infectious cases.

In cases of bronchitis it is a good and simple plan to keep a kettle boiling on the fire, and to fix on to the spout an indiarubber tube about three feet in length; or, better still, a tin tube somewhat longer, or a toy trumpet which can be fixed on the kettle-spout. This will send the steam from the kettle into the room and so make the air moist, and easier for the patient to breathe.

THE BED.

If possible, nurse your patient upon an iron bedstead three and a half feet wide. A bed should not be so wide that the nurse cannot easily make it without

strain. Place it, in fever cases, between the fireplace and the door or window ; it should never have its side against the wall.

Never use a feather bed. If you cannot get a hair mattress, clean chaff or flock evenly packed are better. See that the mattress is turned every way every day, when the patient may be moved.

‘The pillows should not be piled one a-top of the other like a wall of bricks.’ Pull the underneath pillow a little forward to support the back, put the next pillow backward, and so on, alternately to the top pillow, which should be put back to raise the head, without throwing it forward. Of course the height or number of pillows must depend on the taste or disease of each patient.

The bed-coverings should be warm, but they must not be heavy. Woollen blankets are much better than cotton quilts.

A good bed-rest is formed by a chair placed upside down, with its back against the patient’s back. In cases of heart disease and some other complaints, when the sufferer is worn out with trying to sit up and not daring to lie down, this simple plan will be found a great alleviation.

In making the bed, you must pull the underneath sheet and blanket perfectly flat so as to avoid all wrinkles. Take also great care to remove all bread-crumbs. Nothing is more destructive of a patient’s

comfort than neglect in this particular. Never allow anything to remain under the bed.

When you wish to change the bedclothes of a patient who cannot get up, roll up the sheet tightly to the middle lengthways (not across the bed), arrange the clean sheet on the space thus vacant with half its width rolled up, lift the patient on to the newly made part, slip off the soiled sheet, and unroll the clean one.

CLEANLINESS.

The nurse should keep herself, her patient, and the room as clean as possible. She should never allow herself to become accustomed to dirt, although she may often have very dirty work to do. She should remove the dust from the room with a damp cloth, not just flap it from one part of the room to another.

In washing the patient use hot water instead of cold, as it more easily removes dirt. Do not forget to use soap.

In cases where the doctor does not allow ordinary washing, sponging with vinegar and water is perfectly safe, and is refreshing to the patient.

Washing should always be done in small parts at a time, keeping the rest of the body carefully covered, and drying carefully. Rub with a coarse towel when this can be borne.

Washing is very tiring to the patient. Nourishment should be given before or after, whichever is preferred.

BATHS.

A tepid bath should be 90°. A hot bath begins at 98°, and should gradually increase in temperature if the patient can bear it. A child's dread of a bath is often conquered by wrapping it in a blanket, and keeping it on when in the bath. Test the heat of the water with your arm rather than with your hand, which is less sensitive, on account of its constant exposure.

TEMPERATURE.

The temperature of the room should be about 65° Fahrenheit, and it is a good plan to have a thermometer in order to see that it is kept as even as possible, and not allowed to vary. The coldest part of the twenty-four hours is always from 2 a.m. to sunrise, and it is then that the greatest care is necessary in order to prevent the room from becoming too cold.

Sometimes the doctor may ask you to take the temperature of the patient. To do this you must put the bulb of the little thermometer in his mouth, and get him to close his lips and breathe through his nose.

If this is not possible, place the thermometer in the armpit, and press the arm down over it.

The natural heat in health is about $98\frac{1}{2}^{\circ}$, but it rises above this point in fever.

THE NURSE

Should wear a dress of washing material, and a large apron.

She should move gently, speak softly, but not in a whisper ; and should leave worries outside the door, so that the patient may be kept calm and quiet.

FOOD.

Food should be served neatly on clean plates, and made to look as appetising as possible. It should be given punctually at proper hours. It is useless to try to give too much at once : when a teacupful cannot be swallowed, try a teaspoonful oftener. Only just so much as is likely to be eaten should be taken into the sick-room, and directly the patient has finished, what remains should be removed. In a case of infectious fever it should be burnt, and on no account should it be eaten by another person.

For a convalescent patient, the food should be as much varied as possible, and, as a rule, the greatest amount of nourishment should be put into the smallest space.

Try to give to a weak patient such food as will afford him the most nourishment for the least work, either to his digestive organs or to his teeth ; and let such work as there must be fall on the part of him that is best able to bear it.

Medicine bottles should be kept out of sight.

SIMPLE REMEDIES AND RECIPES.

BED-SORES

Appear in persons who have remained in bed for some time, and are caused by continual pressure on certain parts of the body ; such as the lower parts of the back, the projecting points of the shoulders, the elbows, heels. These parts should be carefully watched by the nurse, and the skin should be hardened by brushing them over with a little alum and water, spirit, or lemon-juice. Great cleanliness, regular washing and thorough drying, will all help to prevent bed-sores, which are much more frequently found on persons who are nursed at home than in hospital patients.

The position of the patient should be changed, so that he does not lie for too long on one part of his body.

Air-cushions, or pads of cotton-wool, will help to relieve pressure.

The sheets should be kept free from wrinkles and from bread-crumbs. Nothing more tends to bring on bed-sores.

The signs of a coming bed-sore are redness, swelling, irritation, or a pricking feeling. If this is neglected a black spot will appear, which may grow large and deep, and spread into a wound.

BEEF TEA.

Cut the meat small, put it in a jar or bottle, add a pint of cold water to each pound of meat, tie brown paper over, and set the jar in a cool oven or in a saucepan half full of water. Let it cook five or six hours, and then strain it off. If you are in a hurry, put less water at first, strain it off, and then add the rest of the water, and cook it again. The fat can all be taken off with paper, but it is often wise *not* to take it off. If bones are to be used, break them up; but the tea is better made of lean meat only.

Very sick persons sometimes have raw beef-tea, or meat juice, given to them. To make this you must scrape or pound lean meat, add cold water, a pint to a pound, and let it stand for about twenty minutes before straining it off.

BLISTERS.

A blister should be fixed loosely enough to allow space for the fluid to collect. It is better to keep it

in its place with a bandage, and not to use the rim of sticking-plaster that is usually attached to it. When the blister has well risen, the risen skin should be snipped at the lowest part, and the fluid allowed to run off, care being taken that it does not run over the healthy skin.

Then apply a little dressing of pure lard or spermaceti ointment spread on a piece of lint or cotton-wool.

The time that a blister takes to rise varies with different people. It may be from four to twelve hours.

BROTH.

Put two pounds of meat into a saucepan with cold water to cover it, salt, and a tablespoonful of pearl barley or rice. Let it boil up slowly, skim it, add a carrot and turnip, if your patient is able to take vegetables in any form, and let it simmer very slowly for two or three hours. Take out the meat and vegetables, take the fat off the broth, and serve it with a nice thin piece of toast.

A lean piece of neck of mutton, a chicken, or the fleshy part of a knuckle of veal, are suitable to make broth of.

FOMENTATIONS.

Warm a basin, cover it with a towel ; place the flannel on the towel. Pour in *boiling* water, and wring the flannel dry in the towel. This is rather easier to do if you pin or tack a hem in each end of the towel and run a stick in each hem. Shake the flannel lightly, apply it to the part to be fomented, covering it with dry flannel. Properly wrung flannels will not scald or blister, however hot the water.

The coarser the flannel, the longer it will retain the heat. It should be changed about every quarter of an hour.

Opium or turpentine are sometimes ordered to be sprinkled on a fomentation, and sometimes a decoction of poppy heads. It is made thus : Take four ounces of dried poppy heads, break them in pieces, empty out the seeds, boil the shells in three pints of water for a quarter of an hour, strain through a sieve, and use the water.

GRUEL.

Mix thoroughly a tablespoonful of prepared groats or fine oatmeal with a little cold water, and pour over a pint of boiling water, or milk. Boil for ten minutes,

stirring all the time. Add a little sugar and spice if it is liked.

Arrowroot and cornflour are mixed in the same way, but need only two or three minutes' boiling.

ICE

May be applied in a common sponge-bag, about half-full, or in an ice-bag, sold on purpose. It should be broken up, and the air squeezed out of the bag. Not till *all* the ice has melted must it be refilled. Ice is also given in small pieces to suck.

Ice should be wrapped in thick flannel, and kept from the air, and so placed that as it melts the water drains away. If it is only wanted to keep things cool, a basin of salt and water is a cheap substitute.

OINTMENTS

Should be applied to the raw part only, and not to the skin around which is uninjured.

POULTICES

Are another way of supplying warmth and moisture.

In making a poultice have everything quite ready before you begin. Warm the basin in which you are going to mix it; warm the spoon with which you are

going to stir it; warm the plate on which you are going to carry it to the bedside. A poultice should not be made so soft that it runs or is sticky; it should be firm, so that it can be cleanly cut with a knife; it should be about half an inch thick, so that it may keep hot and moist; it should be spread on the calico, or brown paper, leaving an inch of the calico all round, which you turn over to form smooth borders. Apply the poultice by its lower edge first, and lay gradually upwards.

LINSEED.—Gradually stir the linseed into boiling water to form a thick paste. Spread it on the calico. Smear the surface of the poultice with oil to prevent it sticking.

BREAD.—Take a piece of bread, without crust, crumble it on a plate, dry it in front of a warm fire for a quarter of an hour. Crumble the dried bread into a little boiling water; spread it quickly, as a bread poultice cools very rapidly. Smear the surface with oil, or cover with muslin.

CHARCOAL.—Add from a quarter to half an ounce of powdered charcoal to either linseed or bread poultice, stirring most in with the poultice, and sprinkling the remainder on the surface.

MUSTARD.—Use warm, not boiling, water, and spread on brown paper. Dilute the strength of the mustard with flour or linseed before spreading. It is usually made half of mustard, half of linseed-meal or

flour. All mustard poultices should be covered with muslin or thin paper.

WATER-DRESSINGS.

Are made of folded linen soaked in water. They should be rather larger than the wound, and the oil-silk covering should be at least an inch larger than the lint, or the water will evaporate.

THE END.

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